DATE

ISSUE SLIP STAPLE AREA (for additional cross references) **POSITION** INITIALS ID NO. **FEE DETERMINATION** O.I.P.E. CLASSIFIER **FORMALITY REVIEW RESPONSE FORMALITY REVIEW INDEX OF CLAIMS** Rejected Allowed (Through numeral)... Canceled Restricted

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)